

AUG 17 2007

"PATENT"

AMENDMENT TRANSMITTAL FORM

In re application of: James T. Carey, et al.) Before the Examiner
U. S. Serial No.: 10/678,547) Ellen M. McAvoy
Filed: October 3, 2003)
For: LOW-VOLATILITY FUNCTIONAL FLUIDS) Confirmation Number: 2518
USEFUL UNDER CONDITIONS OF HIGH) Group Art Unit: 1764
THERMAL STRESS AND METHODS FOR THEIR) Family Number: P2002J111 US2
PRODUCTION AND USE)

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to the
Commissioner for Patents facsimile number 1-571-273-8300 on the date shown below.

Susan Fleming _____ August 17, 2007
Type or print name of person signing certification Signature Date

Transmittal herewith is an amendment/response in the above-identified application.

Petition for extension of time pursuant to 37 CFR 1.136 and 1.137 is hereby made, if and to the extent, required. The fee for this extension of time is calculated to be \$ _____ to extend the time for filing this response until _____.

The fee for any changes in number of claims has been calculated as shown below.

CLAIMS AS AMENDED						
(1)	(2) Claims Remaining After Amendment	(3)	(4) Highest Number Previously Paid For	(5) Present Extra	(6) Rate	(7)
Total Claims	*	Minus	**		x 50.00	Ø
Indep. Claims	*	Minus	***		x 200.00	Ø
MULTIPLE DEPENDENT CLAIM FEE					\$ 360.00	Ø
FEE FOR CLAIM CHANGES						Ø

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The total fee for this Amendment, including claim changes and any extension of time is calculated to be \$ Ø.

☒ Charge \$ _____ to DEPOSIT ACCOUNT NO. 05-1330.

☒ The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 and 1.17 which may be required by this paper, or credit any overpayment, to DEPOSIT ACCOUNT NO. 05-1330.

8/17/2007
DATE OF SIGNATURE

Post Office Address: [to which correspondence is to be sent]
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P. O. Box 900
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ATTORNEY OR AGENT OF RECORD

GARY P. KATZ

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☒ Pursuant to 37 CFR 1.34(a)

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